COMMUNICABLE DISEASES AND OTHER NOTIFIABLE CONDITIONS – REPORTING GUIDELINES

LOCAL PUBLIC HEALTH CONTACT INFORMATION

City of Racine Public Health Department - (262) 636-9201

After-Hours Emergencies (Racine County Dispatch) – (262) 886-2300

Central Racine County Health Department - (262) 898-4460

WI Bureau of Communicable Diseases - (608) 267-9003

Report these diseases **IMMEDIATELY** upon identification or suspicion to the **patient's local health department** by telephone or fax. Follow up with *Acute* & Communicable Diseases Case Report (DHS-44151), or enter into Wisconsin Electronic Disease Surveillance System (WEDSS) within 24 hours:

Anthrax 1,2,3,4,5

Botulism (Clostridium botulinum) (inc. foodborne, infant, wound, and other) 1,2,4,5 Rubella 1,2,4,5

Carbapenem-resistant Enterobacteriaceae (CRE) 2

Cholera (Vibrio cholera) 1,3,4

Diphtheria (Corynebacterium diphtheria) 1,3,4,5

Haemophilus influenzae invasive disease (including epiglottitis) 1,2,4,5

Hantavirus infection 1,2,4,5

Hepatitis A 1,2,3,4,5

Measles (Rubeola) 1,2,3,4,5

Meningococcal disease (Neisseria meningitidis) 1,2,3,4,5

Middle Eastern Respiratory Syndrome-associated Coronavirus (MERS-CoV) 2,3,4

Pertussis (Whooping cough, caused by any Bordetella infection) 1,2,3,4,5

Plague (Yersinia pestis) 1,4,5

Poliovirus infection (paralytic or nonparalytic) 1,4,5

Primary Amebic Meningoencephalitis (PAM) (Naegleria fowleri) 2,4,5,6

Rabies (human, animal) 1,4,5

Ricin toxin 4,5

Rubella (congenital syndrome) 1,2,5

Severe Acute Respiratory Syndrome- associated Coronavirus (SARS-CoV) 1,2,3,4

Smallpox 4,5

Tuberculosis 1,2,3,4,5

Vancomycin-intermediate Staphylococcus aureus (VISA) and Vancomycin-

resistant Staphylococcus aureus (VRSA) infection^{1,4,5}

Viral Hemorrhagic Fever (VHF) (including Crimean-Congo, Ebola, Lassa, Lujo, and Marburg viruses, and New World Arenaviruses) 1,2,3,4

Yellow Fever 1,4

Outbreaks, **confirmed or** suspected:

Foodborne or waterborne 1,3,4,6 Occupationally-related diseases 6

Other acute illnesses 3,4,6

Any detection of or illness caused by an agent that is foreign, exotic, or unusual to Wisconsin, & that has public health implications. 4

Report the following diseases to the patient's local Public Health Officer or designee within 72 hours of the identification of a case or suspect case. Report by fax or mail using an Acute and Communicable Disease Case Report (DHS F-44151), by telephone, or by entering the data into WEDSS:

Anaplasmosis 1,2,5

Arboviral disease (including, but not limited to, disease caused by California serogroup, Chikungunya, Dengue, Eastern Equine Encephalitis, Powassan, St. Louis Encephalitis, West Nile, Western Equine Encephalitis, and Zika viruses) 1,2,4

Babesiosis 1,2,4,5

Blastomycosis²

Borreliosis (Lyme disease is reportable as a distinct disease) 2,4,6

Brucellosis 1,2,4

Campylobacteriosis 1,2,3,4

Chancroid (Haemophilus ducreyi) 1,2

Chlamydia (Chlamydia trachomatis) 1,2,4,5

Coccidiomycosis (Valley fever) 1,2,4

Cryptosporidiosis (Cryptosporidium) 1,2,3,4

Cyclosporiasis (Cyclospora) 1,2

Ehrlichiosis 1,2,5

Environmental and occupational lung diseases:

Asbestosis 6

Chemical pneumonitis 6

Occupational lung diseases caused by bio-dusts and bio-aerosols 6 Silicosis 1,6

E. coli infection, (caused by Shiga toxin-producing E. coli (STEC)) 1,2,3,4

E. coli infection, (caused by enteropathogenic (EPEC), enteroinvasive (EIEC), or enterotoxigenic E. coli (ETEC)) 2,3,4

Free-living amebae infection (including Acanthamoeba disease (including keratitis) and Balamuthia mandrillaris disease) 2,4

Giardiasis 1,2,3,4

Gonorrhea (Neisseria gonorrhoeae) 1,2,4,5

Hemolytic uremic syndrome 1,2,3,4

Hepatitis B 1,2,3,4,5, C 1,2, D 2,3,4, & E

Histoplasmosis 5

Influenza-associated hospitalization ²

Influenza-associated pediatric death 1,2,4

Influenza A virus infection, novel subtypes 1,2

Kawasaki disease²

Latent Tuberculosis infection (LTBI) 2,5

Legionellosis 1,2,4,5

Leprosy (Hansen's Disease) 1,2,3,4,5

Category III

Leptospirosis ^{1,2,4}
Listeriosis ^{1,2,4}
Lyme disease ^{1,2}
Lymphocytic Choriomeningitis Virus (LCMV) infection ⁴
Malaria (Plasmodium) ^{1,2,4,5}
Meningitis bacterial (other than Haemophilus influenza meningococcal or

Meningitis, bacterial (other than $Haemophilus\ influenza$, meningococcal or streptococcal, which are reportable as distinct diseases) 2

Mumps 1,2,4,5

Mycobacterial disease (nontuberculous)

Pelvic inflammatory disease ²

Psittacosis 1,2,4

Q Fever (Coxiella burnetti) 1,2

Rheumatic fever (newly diagnosed & meeting the Jones criteria) 5

Rickettsiosis (spotted fever rickettsiosis is reported as a distinct disease) 2,4,6

Salmonellosis 1,2,3,4

Shigellosis (Shigella) 1,2,3,4

Spotted fever Rickettsiosis (including Rocky Mountain spotted fever) 1,2,4,5

Streptococcal disease (all invasive disease caused by Groups A & B Streptococci)

Streptococcus pneumoniae invasive disease (invasive pneumococcal) 1

Syphilis (Treponema pallidum) 1,2,4,5,6

Tetanus 1,2,5

Toxic shock syndrome 1,2

Toxic substance related diseases:

Blue-green algae (Cyanobacteria) & Cyanotoxin poisoning 2,4,6

Carbon monoxide poisoning ^{1,6} Infant methemoglobinemia ⁶

Lead (Pb) intoxication (specify Pb level) ^{1,6} Metal poisonings other than lead (Pb) ⁶

Pesticide poisonings 1,6

Toxoplasmosis

Transmissible spongiform encephalopathy (TSE, human)

Trichinosis 1,2,4

Tularemia (Francisella tularensis) 1,2,4,5 Typhoid fever (Salmonella Typhi) 1,2,3,4

Varicella (chickenpox) 1,3,5

Vibriosis (non-cholera Vibrio) 1,2,3,4

Yersiniosis 2,3,4

Zika virus infection 1,2

Report the following disease to the State Epidemiologist within 72 hours of the identification of a case or suspect case on a Wisconsin Human Immunodeficiency Virus (HIV) Infection Case Report Form (DHS F-44338) or by other means.

Human Immunodeficiency Virus (HIV) infection (AIDS has been reclassified as HIV Stage III) 1,2,4

Mail report to: James Vergeront MD

Bureau of Communicable Diseases 1 W. Wilson Street – Room 265 Madison, WI 53703

Additionally, the following laboratory results shall be reported on all persons newly or previously diagnosed with HIV infection each time the test is conducted. See s. 252.15(7)(b), Stats., and s. DHS 145.04(3)(b).

- All CD4+ test results (CD4+ T-lymphocyte counts and percentages)
- Both detectable and undetectable HIV viral load results
- HIV genotypic results
- All components of the HIV laboratory diagnostic testing algorithm when the initial screening test is reactive.

Legend:

New diseases/conditions in bold.

- ¹ Infectious disease or other condition designated as notifiable at the national level.
- ² Required Wisconsin or CDC follow-up form completed by public health agency.
- ³ High-risk assessment by local health department is needed to determine if patient or member of patient's household is employed in food handling, day care, or health care.
- ⁴ Source investigation by local or state health department is needed.
- ⁵ Immediate treatment is recommended, i.e. antibiotic or biologic, for the patient, contact, or both.
- ⁶ Coordination between local and state health departments is recommended for follow-up.